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			Application or Docket Number											
PATENT APPLICATION FEE DETERMINATION RECO											1			
Effective October 1, 2000								00	785033	38	5227	5 - 000	۶	
CLAIMS AS FILED - PART I								SMALL EN	ITITY		OTHER	THAN		
		(Colui	mn 2)		TYPE _		OR	SMALL						
TO	TAL CLAIMS		26					RATE	FEE		RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00		
TOTAL CHARGEABLE CLAIMS			<i>9</i> minus 20=		• 9			X\$ 9=		OR	X\$18=	162.		
INDEPENDENT CLAIMS			ل minus 3 =		1		Ì	X40=		OR	X80=	80		
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT		囟			+135=		OR	+270=			
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR		270 1222:0		
CLAIMS AS AMENDED - PART II								,			OTHER			
(Column 1)				(Colu			۰	SMALL	ENTITY	OR	SMALL	ENTITY	İ	
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT	•	HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	*	Minus	**		=		X\$ 9=	- :	OR	X\$18=			
	Independent	*	Minus	***	5 01 4114	= ,		X40=		OR	X80=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270= *	in the second of		
(4 ·								TOTAL	海岛 泰利州东		TOTAL			
	(Column 1) (Column 2) (Column 3)						,	ADDIT. FEE	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		ADDIT. FEE		ľ	
AMENDMENT B	CLAIMS			HIGH	EST		lr		ADDI-			ADDI-	DDI	
		REMAINING AFTER		PREVI		PRESENT EXTRA		RATE	TIONAL	ا بر او افد	RATE	TIONAL		
		AMENDMENT	,	PAID	FOR		╽┟	•	FEE		<u>.</u> 	FEE		
	Total	•	Minus '	**		=		X\$ 9=		OR	X\$18=			
	Independent	*	Minus	***	COL AINA	=	11	X40=	e ozos y odnarożno	OR.	X80=			
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						'	+135=		OR	+270=			
	TOTAL									OR	TOTAL			
		(O a la susa sa 4)		(O-1)	O\	(Oak	•	ADDIT. FEE		, •	ADDIT. FEE	-	١	
		(Column 1) CLAIMS]		mn 2) IEST	(Column 3)	1 г		ADDI	ı		ADDI	Į	
AMENDMENT C		REMAINING AFTER		PREVI	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	l	
	Total	AMENDMENT	A dimun		FOR	}	 		FEE			FEE ;	ł	
	Total	•	Minus	**		=	!	X\$ 9=		OR	X\$18=		1	
	Independent	*	Minus	***	T CL AIM]=	!	X40=		OR	X80=		ľ	
┞	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +135=									OR	+270=			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											TOTAL		ł	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												L	1	
	The "Highest Nun	nber Previously Pa	id For" (Total o	r Independ	dent) is th€	highest numbe	er fou	ind in the app	oropriate bo	x in co	olumn 1.			